

MSFC Institutional Center Event Reserve Request

National Aeronautics and
Space Administration



1. Managing Organization:										2. Request Date:																	
3. Requestor's Name:										4. Phone Number:																	
5. Event Title:								6. Date(s) of Event:																			
7. Event Type: <input type="checkbox"/> New Event – Skip to Item 10. <input type="checkbox"/> Existing Event								8. Original Budget:																			
9. Events Management Board (EMB) Score:						10. Is this a One-time or a Recurring Event? <input type="checkbox"/> One-time Event <input type="checkbox"/> Recurring Event: Every Years																					
11. Reserve Required (Whole Dollars):																											
12. Justification for Request:																											
13. Basis for Budget Required: (Include services required with estimates)																											
14. Request Obligation Plan (Whole Dollars):																											
Oct Nov Dec Jan Feb Mar Apr May June July Aug Sept Total																											
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15. Request Cost Plan (Whole Dollars):																											
Oct Nov Dec Jan Feb Mar Apr May June July Aug Sept Total																											
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16. Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No																											
17. EMB Managing Org. Representative Typed Name and Signature:										Date Signed:																	
18. EMB Chairperson Signature Typed Name and Signature:										Date Signed:																	
Section below for EMB Use Only																											
Comments:										Yay Votes:		Nay Votes:															